

**ARTICLES OF ORGANIZATION  
OF  
PERIGROVE LLC**

Under Section 203 of the Limited Liability Company Law

**FIRST:** The name of the limited liability company is:

**PERIGROVE LLC**

**SECOND:** The county, within this state, in which the office of the limited liability company is to be located is **ROCKLAND**.

**THIRD:** The Secretary of State is designated as agent of the limited liability company upon whom process against it may be served. The address within or without this state to which the Secretary of State shall mail a copy of any process against the limited liability company served upon him or her is:

PERIGROVE LLC  
351 SPOOK ROCK ROAD STE 200  
SUFFERN, NY 10901

I certify that I have read the above statements, I am authorized to sign these Articles of Organization, that the above statements are true and correct to the best of my knowledge and belief and that my signature typed below constitutes my signature.

DAVID GEFNER, ORGANIZER (signature)

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DAVID GEFNER , ORGANIZER

**Filed by:**  
USACORP INC  
325 DIVISION AVE.  
SUITE 201  
BROOKLYN, NY 11211

**USACORP INC. (CS)**  
**DRAWDOWN**  
**CUSTOMER REF# PELL**

**FILED WITH THE NYS DEPARTMENT OF STATE ON: 01/17/2017**  
**FILE NUMBER: 170117010496; DOS ID: 5069100**

170404000167

**CERTIFICATE OF PUBLICATION  
OF  
Perigrove LLC**

Under Section 206 of the Limited Liability Company Law

The undersigned is the authorized person of **Perigrove LLC**.

If the name of the limited liability company has changed, the name under which it was organized is:

The articles of organization were filed by the Department of State on: **1/17/2017**.

The published notices described in the annexed affidavits of publication contain all of the Information required by Section 206 of the Limited Liability Company Law.

The newspapers described in such affidavits of publication satisfy the requirements set forth in the Limited Liability Company Law and the designation made by the county clerk.

I certify the foregoing statements to be true under penalties of perjury.

3/16/2017  
(Date)

/s/ Joseph Strauss  
(Signature)

Joseph Strauss  
(Type or Print Name)

170404000167

## **AFFIDAVIT OF PUBLICATION**

**Under section 206 of the Limited Liability Company Law  
Hamodia Newspaper**

State of New York  
County of Rockland

The undersigned is the publisher of Hamodia, a daily newspaper published in the county of Kings, New York. A notice regarding Perigrove LLC was published in said newspaper once a week for six successive weeks, commencing on 1/27/2017 and ending 3/3/2017. The text of the notice as published in said newspaper is as set forth in the annexed exhibit. This newspaper has been designated by the Clerk of Rockland County for this purpose.

By: Peri Waldner  
Peri Waldner

Authorized Designee of Ruth  
Lichtenstein, publisher of Hamodia

Affirmed and Subscribed to Before me  
this 6<sup>th</sup> Day of Mar 2017

Arsh S. [Signature]

Notary Public

ABRAHAM J. HESCHEL  
Notary Public, State of New York  
No. 01HE6076299  
Qualified in Kings County  
Commission Expires June 19, 2018

Perigrove LLC. Filed  
1/17/17. Office: Rockland  
Co. SSNY designated as  
agent for process & shall  
mail to: 351 Spook Rock Rd  
Ste 200, Suffern, NY 10901.  
Purpose: General.

HA# 8040

1/27, 2/3, 2/10, 2/17  
2/24, 3/3/17

Affidavit of Publication  
Under Section 206 of the  
Limited Liability Company Law

State of New York  
County of New York, ss.:

The undersigned is the publisher of The Jewish Press, a weekly newspaper published in Brooklyn, New York. A notice regarding Perigrove LLC was published in said newspaper once in each week for six successive weeks, commencing on January 27, 2017 and ending March 3, 2017. The text of the notice as published in said newspaper is set forth below. This newspaper has been designated by the Clerk of Rockland County for this purpose.

Naomi Klass Mauer, Publisher

By:  \_\_\_\_\_

Rose Gluckman, Authorized Designee of the Publisher

Sworn to before me this 3 day of May, 2017

\_\_\_\_\_  
Notary Public

**Arthur Klass**  
Notary Public State of NY  
No. 01KL4922689  
Qualified in Kings County  
Comm. Expires 3/7/2018

Perigrove LLC. Filed 1/17/17. Office: Rockland Co. SSNY designated as agent for process & shall mail to: 351 Spook Rock Rd Ste 200, Suffern, NY 10901. Purpose: General. JP# 9132 1/27,2/3,10,17,24,3/3/17

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**CERTIFICATE OF PUBLICATION  
OF  
Perigrove LLC**

Under Section 206 of the Limited Liability Company Law

**Filed by:**

**USACORP INC**

**325 DIVISION AVE. SUITE 201**

**BROOKLYN, NY 11211**

***CUST. REF.  
MAR1651***

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*For DOS Use Only*

**DRAWDOWN ACCOUNT: CS  
USACORP INC**

**STATE OF NEW YORK  
DEPARTMENT OF STATE**

**FILED APR 04 2017**

**TAX S** \_\_\_\_\_  
**BY:** WR

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# Biennial Statement

NYS Department of State  
Division of Corporations, State Records &  
Uniform Commercial Code  
<http://www.dos.ny.gov>

**BUSINESS NAME:** PERIGROVE LLC

**FILING PERIOD:** 01/2019

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**Part 1 - Service of Process Address (Address must be within the United States or its territories)**

<b>Name</b> PERIGROVE LLC		
<b>Address Line 1</b> 351 SPOOK ROCK ROAD STE 200		
<b>Address Line 2</b> 		
<b>City</b> SUFFERN	<b>State</b> NY	<b>Zip Code</b> 10901

**Signer Information**

I affirm that the statements contained herein are true to the best of my knowledge, that I am authorized to sign this Biennial Statement and that my signature typed below constitutes my electronic signature.

<b>Electronic Signature</b> DAVID GEFNER
<b>Capacity of Signer</b> MANAGER

**FILED WITH THE NYS DEPARTMENT OF STATE ON: 01/08/2019**

**FILING NUMBER: 190108060644 - 5069100**

**Biennial Statement**

NYS Department of State  
Division of Corporations, State Records &  
Uniform Commercial Code  
<http://www.dos.ny.gov>

**BUSINESS NAME:** PERIGROVE LLC  
**FILING PERIOD:** 1/1/2021 12:00:00 AM

**Part 1 - Service of Process Address (Address must be within the United States or its territories)**

**Name**

PERIGROVE LLC

**Address Line 1**

351 SPOOK ROCK ROAD

**Address Line 2**

**City**

SUFFERN

**State**

NY

**Zip Code**

10901

**Signer Information**

I affirm that the statements contained herein are true to the best of my knowledge, that I am authorized to sign this Biennial Statement and that my signature typed below constitutes my electronic signature.

**Electronic Signature**

DAVID GEFNER

**Capacity of Signer**

MANAGER